

# FEC FORM 9

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR

### ELECTIONEERING COMMUNICATIONS

#### 1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

Alliance For A New America

(b) Address (number and street) ☐ check if different than previously reported

PO Box 174

(c) City, State and ZIP Code

Alexandria

VA

22313

#### 2. FEC Identification Number

C C00000000

(d) Name of Employer or Principal Place of Business

(e) Occupation

#### 3. Is This Statement

☒

New

or

☐

Amended

#### 4. Covering Period

M M / D D / Y Y Y Y  
08 / 06 / 2007

through

M M / D D / Y Y Y Y  
12 / 15 / 2007

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y (b) Communication Title Worried

12 / 15 / 2007

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)?

Yes ☐No ☒

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☒No ☐

#### 8. Custodian of Records

(a) Name

Katherine M Buchanan

(b) Address (number and street)

PO Box 174

(c) City, State and ZIP Code

Alexandria

VA

22313

(d) Name of Employer or Principal Place of Business

Self Employed

(e) Occupation

Consultant

#### 9. Total Donations This Statement

841121.00

#### 10. Total Disbursements/Obligations This Statement

590000.00

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Katherine M Buchanan

SIGNATURE

DATE 12/16/2007

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.